

PERSONAL DATA SHEET

WARNING: Any misinterpretation made in the Personal Data Sheet and the Work Experience Sheet shall cause the filing of administrative/criminal case/s against the person concerned.

READ THE ATTACHED GUIDE TO FILLING OUT THE PERSONAL DATA SHEET (PDS) BEFORE ACCOMPLISHING THE PDS FORM.

Print legibly. Tick appropriate boxes (☐ and use separate sheet if necessary. Indicate N/A if not applicable. DO NOT ABBREVIATE.

1. CS ID

(Do not fill up. For CSC use only)

I. PERSONAL INFORMATION

2. SURNAME	MAZO		
FIRST NAME	ANDREW	NAME EXTENSION (JR., SR)	
MIDDLE NAME	ANTOLAN		
3. DATE OF BIRTH (mm/dd/yyyy)	6/4/1971	16. CITIZENSHIP	<input checked="" type="checkbox"/> Filipino <input type="checkbox"/> Dual Citizenship <input type="checkbox"/> by birth <input type="checkbox"/> by naturalization P/s. indicate country:
4. PLACE OF BIRTH	MALATE, MANILA	If holder of dual citizenship, please indicate the details.	
5. SEX	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		
6. CIVIL STATUS	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Other/s:	17. RESIDENTIAL ADDRESS	DUPLEX H-2 House/Block/Lot No. Street VSU-VISCA PANGASUGAN Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province
7. HEIGHT (m)	1.71	ZIP CODE	
8. WEIGHT (kg)	72.00		
9. BLOOD TYPE	A+	18. PERMANENT ADDRESS	House/Block/Lot No. Street GABAS Subdivision/Village Barangay BAYBAY LEYTE City/Municipality Province 6521-A
10. GSIS ID NO.	71040601753	ZIP CODE	
11. PAG-IBIG ID NO.	1700-0029-7699		
12. PHILHEALTH NO.	13-000069843-2		
13. SSS NO.	NONE	19. TELEPHONE NO.	63 53 563 7479
14. TIN NO.	180-493-960	20. MOBILE NO.	0917 523 8258
15. AGENCY EMPLOYEE NO.	V000853	21. E-MAIL ADDRESS (if any)	andrew.mazo@vsu.edu.ph

II. FAMILY BACKGROUND

22. SPOUSE'S SURNAME	MAZO		23. NAME of CHILDREN (Write full name and list all)	DATE OF BIRTH (mm/dd/yyyy)
FIRST NAME	ANALYN	NAME EXTENSION (JR., SR)	HAROLD ADRIAN M. MAZO	11/17/1998
MIDDLE NAME	MENDOZA		IVAN ANDREW M. MAZO	02/27/200
OCCUPATION	UNIVERSITY INSTRUCTOR/RESEARCHER			
EMPLOYER/BUSINESS NAME	DEPARTMENT OF BIOLOGICAL SCIENCES			
BUSINESS ADDRESS	VISAYAS STATE UNIVERSITY, BAYBAY, LEYTE			
TELEPHONE NO.	(63) 53 563 7536			
24. FATHER'S SURNAME	MAZO			
FIRST NAME	DOMINADOR	NAME EXTENSION (JR., SR)		
MIDDLE NAME	IMPOC			
25. MOTHER'S MAIDEN NAME	ANTOLAN			
SURNAME	MAZO			
FIRST NAME	ELENA			
MIDDLE NAME	LATRAS		(Continue on separate sheet if necessary)	

III. EDUCATIONAL BACKGROUND

26. LEVEL	NAME OF SCHOOL (Write in full)	BASIC EDUCATION/DEGREE/COURSE (Write in full)	PERIOD OF ATTENDANCE		HIGHEST LEVEL/ UNITS EARNED (if not graduated)	YEAR GRADUATED	SCHOLARSHIP/ ACADEMIC HONORS RECEIVED
			From	To			
ELEMENTARY	Gabas Community School	Primary Education	1978	1984		1984	Valedictorian
SECONDARY	Experimental Rural High School	High School	1984	1988		1988	
VOCATIONAL / TRADE COURSE	Visayas State College of Agriculture	Bachelor of Science in Statistics	1988	1992		1992	
COLLEGE	Visayas State University	Bachelor of Secondary Education, major in MAPEH	2010	2013		2013	
GRADUATE STUDIES	Visayas State University	Master of Education, major in Physical Education	2013	2016		2016	


(Continue on separate sheet if necessary)

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27.	CAREER SERVICE/ RA 1080 (BOARD/ BAR) UNDER SPECIAL LAWS/ CES/ CSEE BARANGAY ELIGIBILITY / DRIVER'S LICENSE	RATING (If Applicable)	DATE OF EXAMINATION / CONFERMENT	PLACE OF EXAMINATION / CONFERMENT	LICENSE (if applicable)	
					NUMBER	Date of Validity
	Carrier Service Professional	81.62%	8/11/1997	CSC Regional Office No.8	N/A	
	Licensure Exam for Teachers	82.20%	08/17/2014	University of Cebu, Cebu City	1531468	9/3/2017
	Driver's License	N/A	6/4/2016	Baybay City Extension Office	HO3-96- 023306	

V. WORK EXPERIENCE

[illegible]

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VI. VOLUNTARY WORK OR INVOLVEMENT IN CIVIL SOCIETY / GOVERNMENT / PEOPLE / VOLUNTARY ORGANIZATIONS

29. NAME & ADDRESS OF ORGANIZATION (Write in full)	INCLUSIVE DATES (mm/dd/yyyy)		NUMBER OF HOURS	POSITION / NATURE OF WORK
	From	To		
Hayag Family Dev't. Center, Ormoc City, Leyte	06/22/2013	06/22/2013	8.00	Open Water Safety Trainor for Children
Hayag Family Dev't. Center, Ormoc City, Leyte	04/24/2013	04/26/2013	24.00	Swimming Instructor
LGU of Barangay Marcos and San Agustin, Baybay City, Leyte	08/26/2013	08/26/2013	8.00	Assistant Sports Director

(Continue on separate sheet if necessary)

VII. LEARNING AND DEVELOPMENT (L&D) INTERVENTIONS/TRAINING PROGRAMS ATTENDED

(Start from the most recent L&D training program and include only the relevant L&D training taken for the last five (5) years for Division Chief/Executive/Managerial positions)

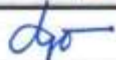
30. TITLE OF LEARNING AND DEVELOPMENT INTERVENTIONS/TRAINING PROGRAMS (Write in full)	INCLUSIVE DATES OF ATTENDANCE (mm/dd/yyyy)		NUMBER OF HOURS	Type of LD (Managerial/Supervisory/Technical/etc)	CONDUCTED/ SPONSORED BY (Write in full)
	From	To			
Visayas-Mindanao Conference on PATH-FIT Tertiary Physical Education: Methods and Outcomes	3/11/2018	4/11/2018	16.00	Participant	EPIC Performance and University of San Carlos Main Campus
Quantitative and Qualitative Statistical Analysis In-Depth Training-Workshop	10/22/2018	10/24/2018	24.00	Participant	STRANDASIA
Regional Senior High School (SHS) Teachers' Training for SUCs and LUCs, Region 8	11/7/2016	07/14/2016	24.00	Participant	Leyte Normal University, Tacloban City
Training on Basic Life Support, Firefighting and Rescue	4/7/2016	11/7/2016	40.00	Participant	VSU and Baybay City Fire Department
Fire Prevention Seminar and Training on Mass Casualty Incident Response	03/27/2015	03/27/2015	8.000	Participant	Baybay City Fire Department and VSU
Seminar/Workshop on the Implementation of Outcomes Based Education (OBE)	4/5/2015	5/5/2015	16.00	Participant	Visayas State University
Football Coaches' Training	6/5/2015	9/5/2015	32.00	Participant	IHK, Coaches Across Continents
FinSwimming Instructors' Course	10/5/2016	12/5/2016	24.00	Participant	PhilippineFin Swimming Federation, Inc.
Sports Clinic on Organizing, Managing, and Officiating Swimming Competition	05/25/2015	05/26/2015	16.00	Participant	IHK, VISSA
Learning Activities and Techniques for Students with Special Needs and teaching Effectiveness	4/7/2014	4/7/2014	8.00	Participant	IHK





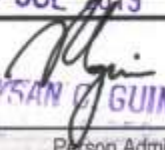
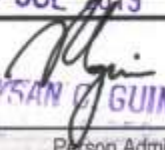
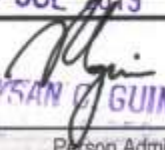
(Continue on separate sheet if necessary)

VIII. OTHER INFORMATION

31. SPECIAL SKILLS and HOBBIES	32. NON-ACADEMIC DISTINCTIONS / RECOGNITION (Write in full)	33. MEMBERSHIP IN ASSOCIATION/ORGANIZATION (Write in full)
	Coach, Varsity Softball Women, SY 2018-2019	
	National Coach, Varsity Swimming Men, SY 2016-2017	
	Coach, Varsity Swimming Men, SY 2016-2017	
	Coach, Varsity Swimming Men and Women, SY 2015-2016	
	Coach, Varsity Swimming Men and Women, SY 2014-2015	
	Coach, Varsity Swimming Men and Women, SY 2013-2014	
	Assistant Coach, Varsity Swimming Men and Women, SY 2011-2012	

(Continue on separate sheet if necessary)

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34. Are you related by consanguinity or affinity to the appointing or recommending authority, or to the chief of bureau or office or to the person who has immediate supervision over you in the Office, Bureau or Department where you will be appointed, a. within the third degree? b. within the fourth degree (for Local Government Unit - Career Employees)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give details: _____												
35. a. Have you ever been found guilty of any administrative offense? b. Have you been criminally charged before any court?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: Date Filed: _____ Status of Case/s: _____												
36. Have you ever been convicted of any crime or violation of any law, decree, ordinance or regulation by any court or tribunal?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
37. Have you ever been separated from the service in any of the following modes: resignation, retirement, dropped from the rolls, dismissal, termination, end of term, finished contract or phased out (abolition) in the public or private sector?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
38. a. Have you ever been a candidate in a national or local election held within the last year (except Barangay election)? b. Have you resigned from the government service during the three (3)-month period before the last election to promote/actively campaign for a national or local candidate?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details: _____												
39. Have you acquired the status of an immigrant or permanent resident of another country?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, give details (country): _____												
40. Pursuant to: (a) Indigenous People's Act (RA 8371); (b) Magna Carta for Disabled Persons (RA 7277); and (c) Solo Parents Welfare Act of 2000 (RA 8972), please answer the following items: a. Are you a member of any indigenous group? b. Are you a person with disability? c. Are you a solo parent?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____ <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, please specify ID No: _____												
41. REFERENCES (Person not related by consanguinity or affinity to applicant/appointee)													
<table><tr><th>NAME</th><th>ADDRESS</th><th>TEL. NO.</th></tr><tr><td>JOSE L. BACUSMO</td><td>Office of the Vice President for Research and Extension, VSU</td><td>563 7064</td></tr><tr><td>BEATRIZ S. BELONIAS</td><td>Office of the Vice President for Instruction, VSU</td><td>9173113309</td></tr><tr><td></td><td></td><td></td></tr></table>		NAME	ADDRESS	TEL. NO.	JOSE L. BACUSMO	Office of the Vice President for Research and Extension, VSU	563 7064	BEATRIZ S. BELONIAS	Office of the Vice President for Instruction, VSU	9173113309			
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BEATRIZ S. BELONIAS	Office of the Vice President for Instruction, VSU	9173113309											
42. I declare under oath that I have personally accomplished this Personal Data Sheet which is a true, correct and complete statement pursuant to the provisions of pertinent laws, rules and regulations of the Republic of the Philippines. I authorize the agency head / authorized representative to verify/validate the contents stated herein. I agree that any misrepresentation made in this document and its attachments shall cause the filing of administrative/criminal case/s against me.													
Government issued ID (i.e. Passport, GSIS, SSS, PRC, Driver's License, etc.) PLEASE INDICATE ID Number and Date of Issuance Government Issued ID: Professional Regulation Commission ID/License/Passport No.: 1531468 Date/Place of Issuance: 03/09/2017, Tacloban City	<table><tr><td></td></tr><tr><td>Signature (Sign inside the box)</td></tr><tr><td>7/25/2019</td></tr><tr><td>Date Accomplished</td></tr></table>		Signature (Sign inside the box)	7/25/2019	Date Accomplished								
													
Signature (Sign inside the box)													
7/25/2019													
Date Accomplished													
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SUBSCRIBED AND SWORN to before me this <u>30 JUL 2019</u> , affiant exhibiting his/her validly issued government ID as indicated above.													
<table><tr><td>ATTY.  GUINOCOR</td></tr><tr><td>Person Administering Oath</td></tr></table>		ATTY.  GUINOCOR	Person Administering Oath										
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